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A Professional Corporation

Fax Transmission | September 22, 2004

TO: Commissioner for Patents
Attn: Examiner Beernnet W. Dada
P.O. Box 1450
Alexandria, VA 22313-1450

FROM: Mark R. Hennings

OUR REF: 50014.0001US01
TELEPHONE: 206.342.6200

Total pages, including cover letter: 20

PTO FAX NUMBER 1-703-872-9306

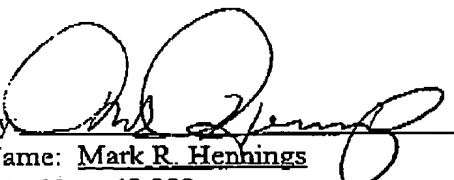
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Title of Document Transmitted:
Applicant: Joseph P. R. Tosey
Serial No.: 09/551,919
Filed: April 19, 2000
Group Art Unit: 2135
Our Ref. No.: 50014.0001US01
Confirmation No. 3485

Transmittal (+ 1 copy) and Final Response

Please charge any additional fees or credit overpayment to Deposit Account No. 13-2725. Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of months to enter these papers, if appropriate.

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office on the date shown below.

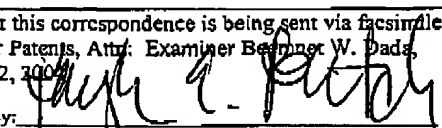
By: 
Name: Mark R. Hennings
Reg. No.: 48,982

September 22, 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Joseph P. R. Tosey
 Serial No.: 09/551,919
 Filed: April 19, 2000
 Confirmation No.: 3485
 Examiner: Beemnet W. Dada
 Group Art Unit: 2135
 Docket: 50014.0001US01
 Due Date: September 23, 2004
 Title: OPERATING SESSION REAUTHORIZATION IN A USER-OPERATED DEVICE

CERTIFICATE UNDER 37 CFR 1.6(d): I hereby certify that this correspondence is being sent via facsimile to (703) 308-7724, Mail Stop Amendment, Commissioner for Patents, Attn: Examiner Beemnet W. Dada, P.O. Box 1450, Alexandria, VA 22313-1450 on September 22, 2004.

By: 
 Name: Kayla U. Butcher

Mail Stop Amendment
 Attn: Examiner Beemnet W. Dada
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

23552

PATENT TRADEMARK OFFICE

Sir:

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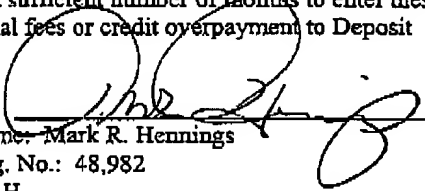
- ☒ Transmittal Sheet in duplicate containing Certificate Under 37 CFR 1.6(d)
☒ Final Response
 The fee has been calculated as shown below in the "Claims as Amended" table
☒ Please charge Deposit Account No. 13-2725 in the amount of \$122.22 for Additional fees

CLAIMS AS AMENDED

Claims Remaining After Amendment		Highest Number Previously Paid For		Present Extra		Rate		Fee
Total Claims								
36	-	34	=	2	x	18.00	=	\$36.00
Independent Claims								
4	-	3	=	1	x	86.00	=	\$86.00
MULTIPLE DEPENDENT CLAIM FEE								\$0.00
TOTAL FILING FEE								122.00

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By: 
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 Reg. No.: 48,982
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(PTO TRANSMITTAL - GENERAL)